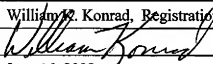


TRANSMITTAL FORM	Application Number	10/760,019
<i>(To be used for all correspondence after initial filing)</i>	Filing Date	January 16, 2004
	Inventor	T.M. EISCHEID et al.
	Group Art Unit	2181
	Examiner Name	Richard B. Franklin
	Attorney Docket Number	SJO92003002US1

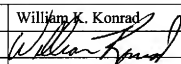
ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> Preliminary <input type="checkbox"/> Supplemental <input type="checkbox"/> After Final <input checked="" type="checkbox"/> Rule 312 <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement: ___ references <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Assignment Papers <input type="checkbox"/> Drawings: ___ Replacement Sheets <input type="checkbox"/> Petition for Corrected Notice of Recordation <input type="checkbox"/> Petition for Corrected Filing Receipt <input type="checkbox"/> Petition: _____ <input checked="" type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Statement Under 37 CFR 3.73(b) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Comments on Statements of Reasons for Allowance	<input type="checkbox"/> Certificate of Correction of Applicant's Mistake (37 CFR 1.323) <input type="checkbox"/> Certificate of Correction of Office Mistake (37 CFR 1.322) <input type="checkbox"/> Notice of Appeal <input type="checkbox"/> Pre-Appeal Brief Request for Review <input type="checkbox"/> Appeal Brief <input type="checkbox"/> Status Letter/ Status Request <input checked="" type="checkbox"/> Issue Fee Transmittal Form <input checked="" type="checkbox"/> Fee Address Indication Form <input type="checkbox"/> Request for Duplicate/Replacement Copy <input type="checkbox"/> Response to Notice of Non-Compliant Amendment
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name:	William M. Konrad, Registration No. 28,868
Signature:	
Date:	June 16, 2008
KONRAD RAYNES & VICTOR, LLP 315 South Beverly Dr., Suite 210 Beverly Hills, CA 90212 310-556-7983	The Commissioner is hereby authorized to charge to Deposit Account No. 09-0466 any additional fee required under 37 CFR 1.16 and 1.17, including all required extension of time fees or any other deficiency, and credit any overpayment to this deposit account.

CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being transmitted through the USPTO EFS-Web system over the Internet on the date indicated below.		
Typed or Printed Name:	William M. Konrad	Customer No. 46917
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